

## **CHAPTER FOUR**

# **REVENUE SOURCE/ PROGRAM STANDARDS AND GUIDELINES**

Revised July 2005

## **CHAPTER FOUR – REVENUE SOURCE/PROGRAM STANDARDS AND GUIDELINES**

### **I. FEDERAL GRANT-IN-AID, STATE GRANT-IN-AID, COUNTY CONTROLLED PARTICIPATION, AND OTHER PARTICIPATION**

In consideration of any Federal Grant-in-Aid, State Grant-in-Aid funds awarded in this Program Agreement, and any County controlled participation and other participation included in the Program Agreement, the County shall provide any of the services described in the BARS manual and DASA BARS supplement.

Limitations: the County cannot set federal Grant-in-Aid funds aside as Title XIX match funds. No federal funds can be used for ADATSA stipends or other direct payments to clients, services in penal or correctional institutions of the state, or inpatient hospital substance abuse treatment.

All counties shall provide services for people referred from the Division of Children and Family Services (DCFS) in such a manner as to maintain access to and use of chemical dependency services by this population.

The services for the ADATSA, PPW, Youth, SSI and DCFS populations are as follows:

#### **A. ADATSA CLIENT SERVICES**

The County shall assure that ADATSA assessment, treatment, living stipends, protective payee, and other treatment support services are available to ADATSA eligible individuals per WAC 388-800, WAC 388-805 and the ABCs of ADATSA. These services shall be provided at a service level in accordance with the County's needs assessment and plan throughout the biennium and as negotiated with the DASA Regional Administrator.

#### **ELIGIBILITY:**

Eligibility for services shall be limited to persons determined financially eligible for ADATSA by the Community Service Office, assessed and referred for care as an ADATSA client.

#### **TREATMENT SERVICES**

1. The County shall establish linkages with agencies already funded to provide, or shall itself establish services or service contracts as necessary to provide employability assessments, job seeking motivation and assistance services, job club support groups, and ancillary transportation as required.

2. The County shall ensure that outpatient treatment providers report all admissions and discharges to the appropriate assessing agency and CSO in writing within five days of admission or discharge.

### **ADATSA ASSESSMENT SERVICES**

1. The County shall ensure that assessments and case monitoring services for all eligible ADATSA treatment clients are provided in accordance with applicable portions of the Washington Administrative Code WAC 388-800 and WAC 388-805, "E-AZ Eligibility Manual, Chemical Dependency Chapter," and the "ABC's of ADATSA."
2. The County shall ensure the receipt of an ADATSA Referral Form from the department verifying the individual's ADATSA financial eligibility.
3. The County shall ensure that the ADATSA assessment agencies use a DASA recommended ADATSA bed utilization resource, if provided by DASA, to locate available residential beds for patients needing referral for residential treatment.
4. The County shall ensure a quality and timely clinical evaluation of an individual's eligibility for ADATSA services and any subsequent case monitoring services is provided. The County shall ensure that every reasonable effort is made to conduct assessment services for applicants within 15 working days from the date of request.
5. The County shall ensure that all necessary TARGET placement data is entered at least one day prior to the planned admission into residential treatment.
6. The County shall establish written criteria and objective oversight to ensure provider integrity that a conflict of interest does not occur when assessment agencies also provide outpatient treatment. A comparison of actual placements vs. American Society of Addiction Medicine (ASAM) recommended placements may be used to assist in this effort.

### **ADATSA LIVING STIPEND SERVICES**

1. Federal Substance Abuse Prevention and Treatment (SAPT) funds cannot be used for Living Stipends.
2. The County is responsible for ensuring contracted funds are available for living stipends throughout the biennium.

3. Protective payees (P-Ps) have the responsibility to assure the department that the stipend is spent on behalf of the client. Use of stipend funds for the P-P's personal or business use is a crime. The County shall ensure an accounting record is required and must be maintained for each client.

**B. PREGNANT, POSTPARTUM AND PARENTING WOMEN'S SERVICES**

**ELIGIBILITY:**

1. Women are eligible for these services while pregnant, postpartum, or parenting dependent children. Parenting women includes women who are attempting to regain custody of their children under DSHS supervision. Dependent Children mean children (17 years of age or younger or through age 20 if enrolled in school) for whom the woman is legally and financially responsible.
2. In the case of pregnant women with no other dependent children, services may continue to be provided from funding under this agreement for up to one year postpartum regardless of birth outcome, adoption or foster care placement of children.
3. All women shall be screened to determine potential eligibility for financial aid through DSHS (ADATSA, SSI, GA-U or TANF), and be referred to a DSHS Community Service Office immediately for financial and medical eligibility determination.
4. A pregnant, postpartum or parenting woman shall receive a "Priority Client Assessment" and referral to an appropriate level of care.

**SERVICES:**

***Pregnant/Postpartum/Parenting Women's Services***

Pregnant, postpartum, or parenting women's services shall take into consideration a full continuum of care for each woman in accordance with WAC 388-805. The County shall ensure the following:

1. Treatment services providers shall make available training to ensure treatment staff receives information/education for addressing the specific issues related to pregnant, postpartum, and parenting women.
2. Treatment services providers shall, whenever possible, assign female counselors as primary counselor for pregnant, postpartum, and parenting women.

### ***Additional Requirements for Pregnant Women's Services***

The County shall ensure:

1. Assessment services shall be provided within 48 hours of application to ensure that pregnant women who are at greatest risk for continuing to use substances are provided rapid access to appropriate care. The assessment shall include a review of the gestational age of fetus, mother's age, living arrangements and family support status. If assessment services are not available upon request, "Waiting List Interim Services" shall be provided immediately.
2. Pregnant women found through assessment to be eligible and appropriate for comprehensive outpatient care, shall be admitted to such care within seven days of request for these services. Such services shall include a referral for prenatal care. If the County does not have the capacity to admit the woman to comprehensive treatment immediately, the County shall immediately make interim services available.
3. Women actively using substantial amounts of alcohol or other substances in any stage of pregnancy shall be assessed as priority for placement in an inpatient treatment program or a Chemical Using Pregnant (CUP) detoxification facility.

### **C. DIVISION OF CHILDREN AND FAMILY SERVICES (DCFS) ASSESSMENT, TREATMENT, AND SUPPORT SERVICES**

The County shall ensure that services are provided for alcohol and substance abuse assessment, outpatient treatment related services, and childcare services for clients served or referred by the Division of Children and Family Services (DCFS).

The County shall:

1. Select community providers to provide chemical dependency assessment and outpatient treatment as part of the County's continuum of services and who are eligible to receive a Title XIX contract from DSHS.
2. Ensure a written working agreement between the County alcohol and drug treatment agencies and the local offices of DCFS is pursued to address the working relationship and at a minimum, access, referral processes and confidentiality issues. Evidence that the working agreement has been pursued is required.
3. Ensure that expanded assessments are available that are broader in

scope and depth than the standard assessment when requested by the referring DCFS social worker. These assessments shall include the following:

- An assessment of imminent or future risk of child abuse and neglect related to the parents' substance abuse,
- Psycho-social history, including past drug/alcohol use, financial problems, education, and legal issues,
- Collateral contacts,
- Results of an initial urinalysis,
- List of assessment tools used, and
- Diagnosis with specific recommended treatment course and prognosis for recovery.

#### **D. YOUTH SERVICES**

##### **ELIGIBILITY**

Services shall be provided to youth ages 10 through 20. The County shall provide the services described below for youth that meet the financial and eligibility standards for publicly-funded chemical dependency treatment services. Funds may also be used for family support services. Clients under age 10 may be served with the approval of the DASA Contract Manager. The age of consent for outpatient treatment for youth is 13 years of age. The County shall ensure the maximization of Title XIX funding for youth in treatment. Youth who are ineligible for Title XIX must have their ineligibility documented within the patient case file. The DASA Regional Administrator will only approve spending plans that have set state dollars aside to provide treatment for Medicaid-eligible youth.

##### **ASSESSMENT SERVICES**

The County shall ensure that each youth receives a multi-dimensional assessment per WAC 388-805

##### **TREATMENT SERVICES**

1. Youth outpatient services shall include treatment appropriate for substance abuse disorder in addition to treatment for substance dependency.
2. Youth outpatient services shall address the needs of those youth waiting for placement in youth residential treatment, and those youth requiring continuing care (aftercare) following youth residential treatment. Outpatient programs shall be involved in the continuum of services and the treatment planning for youth in residential treatment programs.
3. Urinalysis (UA) is an allowable cost only within the context of a

treatment plan and not to exceed four UA's in a 31-day period of time per client.

## **OUTREACH SERVICES**

Outreach services may be provided as a youth outpatient treatment related cost, but outreach contacts may not be counted toward outpatient clients served or hours of outpatient treatment services provided.

## **MEDICAID ELIGIBILITY**

The County shall ensure that all youth are screened for Title XIX financial eligibility and referred to the local DSHS Community Services Office (CSO) for Title XIX eligibility determination if the financial screen so warrants.

## **EPSDT SERVICES**

To assure that youth making application for services receive the full benefit of the department's Early Periodic Screening, Diagnosis, and Treatment (EPSDT) program, the County shall urge that each Title XIX eligible youth that has not previously received an EPSDT health screen be referred to an EPSDT primary health care provider for such services.

## **E. SSI CLIENTS**

The County shall expand capacity for assessment and treatment services for recipients of SSI grants. SSI recipients have a "S01" designation on the upper right-hand corner of their Medical Assistance Identification (MAID) card.

## **II. OPIATE SUBSTITUTION TREATMENT (OST) AND HIV OUTREACH SERVICES**

In consideration of any OST funds awarded in the Program Agreement, the County shall provide treatment services as described below:

Chemical dependency service providers offering opiate substitution treatment program maintenance and/or detoxification services must comply with the rules of:

- WAC 388-805;
- the federal Center for Substance Abuse Treatment (CSAT), 42 CFR, Part 8; 21 CFR 291.505,
- the federal Drug Enforcement Administration, 21 CFR, Parts 1301, 1304, 1305 and 1306;
- Washington State Board of Pharmacy WAC 246-887; as such regulations now exist or are hereafter amended. In addition, and
- Maintain accreditation from a CSAT recognized opioid treatment program accreditation body.

Counties shall ensure that:

- A. Early intervention services for HIV disease and other bloodborne pathogens are made available to individuals seeking treatment services. These services include:

- Appropriate pretest counseling;
- Referral for testing and treatment; and,
- Referral for appropriate post-test counseling.

Provision of services requires informed consent of the recipient. Undergoing such services will not be required as a condition of receiving treatment services for substance abuse or any other services.

- B. Linkages with, and referrals to, a comprehensive community resource network of related health and social services organizations to ensure a knowledge of the availability of these early intervention services are established.
- C. The County shall ensure that Opiate Substitution Treatment (OST) clients utilizing the Medicaid transportation broker services will receive priority for filling a vacant slot at another publicly-funded OST facility if the transfer would result in a significant savings in said transportation costs. The client will not be required to transfer to a closer agency if there are clinical reasons to support not transferring the client.



### **III. TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) SERVICES**

In consideration of any funds awarded for TANF client treatment services, the County shall ensure that services are provided to TANF adults for alcohol and substance abuse assessment, outpatient treatment, treatment related services, and child care services for clients of the Department of Social and Health Services' Community Services Office (CSO) designated as TANF. The County shall:

- A. Select community outpatient treatment providers to provide assessment and outpatient treatment as part of the County's continuum of services and who are eligible to receive a Title XIX contract from DSHS.
- B. Ensure compliance with the guidelines entitled Procedures and Implementation of Chemical Dependence Services for WorkFirst Clients, printed by the Division of Alcohol and Substance Abuse.

#### **IV. TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) OUTSTATIONED STAFF**

In consideration of any funds awarded for outstationing a chemical dependency professional in Community Service Office(s) (CSO) or CSO branches, the County shall ensure chemical dependency counselors are outstationed in CSOs for the purpose of providing services that will improve the access to chemical dependency treatment services, support the implementation of the Medicaid State Plan, and increase the numbers of TANF clients:

- referred for assessment,
- completing assessment,
- entering treatment,
- completing treatment, and
- who become employable as a result of treatment completion.

The services provided by the outstationed counselors are considered services that relate to the administration of the Medicaid program and are funded under the Medicaid Administration provision of the Medicaid State Plan. Outstation counselors do not provide assessments or direct treatment services when performing services funded with this award. The following list specifies the services/activities that may be provided by the outstationed staff:

1. Assist CSO by screening clients for alcohol and drug use.
2. Facilitate client referral for assessment and treatment.
3. Provide information to CSO staff on addictions, treatment, and the referral process.
4. Provide CSO staff with on-site training and understanding of identification of the health-related need for chemical dependency treatment services for WorkFirst clients.
5. Provide consultation to CSO staff on cases where chemical dependency is suspected or known.
6. Assist in outreach with clients who are resistive to treatment.
7. Problem-solve referral and service delivery issues between the CSO and local assessment and treatment agencies.
8. Assist with training local treatment agencies on working with CSO staff.
9. Provide information/education to WorkFirst clients about available chemical dependency treatment services at job search workshops.
10. Provide information/education to CSO subcontractors.

The County shall ensure a written working agreement between the County alcohol and drug treatment agencies and the CSO is pursued to address the working relationship established to jointly implement this coordination effort. Evidence that the working agreement has been pursued is required.

The County shall ensure the activities of the outstationed staff are reported in TARGET on the DASA TARGET Client Support Activities (Non-Treatment) form. Outstationed staff shall enter activities by date, time, services hours, staff ID, etc.

## **V. PREVENTION SERVICES**

In consideration of Prevention Services funds awarded, and in accordance with the Spending Plan and approved county priorities, goals and objectives, the County shall coordinate and provide prevention programs designed to prevent or delay the misuse and abuse of alcohol, tobacco, and other drugs.

Prevention Services shall be provided in accordance with the terms and conditions described in Chapter Three (Planning Guidelines) of the County Implementation Guide. Prevention Services shall address the priorities identified through the county's DASA approved plan.

Program Standards shall include:

- A. Fifty percent of programs supported by DASA funds will be replication or adaptation "Best Practices" prevention programs as identified on the Western Center for the Application of Prevention Technologies (WCAPT) website. In the event that a "Best Practice" is not available, a county may negotiate with their Regional Administrator to use a "Promising Practice" as identified on the WCAPT website.
- B. One hundred percent of the program supported by DASA will meet Center for Substance Abuse Prevention's (CSAP) Principles of Effective Substance Abuse Prevention as presented on the Western Center for the Application of Technologies website.

### **Additional Items**

- A. Counties shall do media notifications whenever possible when funding is granted with DASA funds. Counties are encouraged to develop articles on their prevention programs and acknowledge DASA as the funding source.
- B. Counties are strongly encouraged to inform DASA about proposed prevention approaches and strategies within the "shared environment." The "shared environment" is defined as "the environment in which all children encounter threats to their health – including illicit drugs, alcohol, and tobacco." Factors in the shared environment include: norms, availability and regulations. Examples of prevention approaches and strategies within the "shared environment" include: (1) establishment of community norm that impaired driving is unacceptable; (2) alcohol and tobacco compliance checks to reduce availability of these drugs to minors; (3) community-based initiatives to change local laws, regulations, or policies focused on decreasing alcohol/drug availability and the accompanying alcohol/drug-related problems.
- C. Counties shall be required to have at least one staff person attend one Prevention Provider meeting per year.

## **VI. DETOXIFICATION**

In consideration of any Detoxification funds awarded, the County shall provide detoxification services to persons in programs approved in accordance with WAC 388-805.

DASA encourages development of innovative programs to meet detoxification needs. Implementation of such programs requires the prior approval of DASA to meet certification and funding requirements.

Counties shall ensure that detoxification facilities will have a protocol established on how they will deal with methadone clients who need detoxification from other substances.

Counties also may use Detoxification funds for:

- transportation to a detoxification facility;
- contracted detoxification services in another county (these services shall be over and above the services already contracted by the county in which the detoxification facility is located); and
- Medical detoxification services.

## VII. CRIMINAL JUSTICE TREATMENT ACCOUNT SERVICES

In accordance with the county's Criminal Justice Plan and in consideration of any Criminal Justice Treatment Account (CJTA) funds awarded in this Program Agreement, and any County controlled participation and other participation included in the Program Agreement, the County shall provide alcohol and drug treatment and treatment support services per RCW 70.96A to the following individuals:

- Adults with an addiction or a substance abuse problem that, if not treated, would result in addiction, against whom a prosecuting attorney in Washington State has filed charges.
- Alcohol and drug treatment services and treatment support services to adult or juvenile offenders within a drug court program as defined in RCW 70.96A.055 and RCW 2.28.170.

### A. LIMITATIONS:

1. The County may provide any of the following services as described in the DASA BARS supplement:
  - a. Title XIX Set Aside
  - b. Community Outreach, Intervention, and Referral services. Restriction: Although Alcohol/Drug Information School is a component of Community Outreach, Intervention, And Referral Services, CJTA funds cannot be used to purchase Alcohol/Drug Information School services.
  - c. Interim Services
  - d. Crisis Services
  - e. Detoxification Services
  - f. Outpatient Treatment, General
  - g. Opiate Substitution Treatment
  - h. Case Management, General
  - i. Intensive Inpatient
  - j. Long Term Care
  - k. Recovery House
  - l. Involuntary Residential Treatment Services
  - m. Screening Tests (UA screen/breathalyzer testing). Limited to no more than eight tests per month for each client.
2. The County shall use no more than ten percent of the total CJTA funds for the following services as described in the BARS manual and the DASA BARS supplement:
  - a. Transportation
  - b. Child Care Services

### B. LOCAL MATCH REQUIREMENT

The County is required to provide local match for services purchased with CJTA funds under the following conditions:

1. A dollar-for-dollar match for services to clients who are receiving services under the supervision of a drug court.
2. A 10 percent local match for services to clients who are not under the supervision of a drug court but against whom a prosecuting attorney in Washington State has filed charges.

The County must document this match and report on the match on a Calendar Quarterly basis.

**C. MEDICAID ELIGIBILITY**

The County shall ensure that all clients are screened for Title XIX financial eligibility and referred to the local DSHS Community Services Office (CSO) for Title XIX eligibility determination if the financial screen so warrants.

**D. ELIGIBLE PROVIDERS**

All treatment services provided by these funds must be by DASA certified treatment providers.

**E. SERVICE RATES**

The rates paid shall not exceed the prevailing county rates for outpatient services or state rates for residential services.

**F. REPORTING REQUIREMENTS**

The County shall document services as follows:

1. All clients must be reported on TARGET.
2. Six-month reporting: Submit the following reports to the Regional Administrator no later than sixty (60) days following the last day of the biennial quarter:
  - a. The Six-Month Activity Report, titled the Division of Alcohol and Substance Abuse – Drug Court Supplemental Services Reports.
  - b. The Six-Month Activity Report, titled the Division of Alcohol and Substance Abuse – Court Supervised (Non-Drug Court) Supplemental Services Reports.

## **VIII. CRIMINAL JUSTICE TREATMENT ACCOUNT SERVICES – Innovated Projects**

In accordance with the County's Criminal Justice Plan and in consideration of any Criminal Justice Treatment Account (CJTA) funds awarded in this Program Agreement, and any County controlled participation and other participation included in the Program Agreement, the County shall provide alcohol and drug treatment and treatment support services per RCW 70.96A to the following individuals:

- Adults with an addiction or a substance abuse problem that, if not treated, would result in addiction, against whom a prosecuting attorney in Washington State has filed charges.
- Alcohol and drug treatment services and treatment support services to adult or juvenile offenders within a drug court program as defined in RCW 70.96A.055 and RCW 2.28.170.

### **G. LIMITATIONS:**

1. The County may provide any of the following services as described in the DASA BARS supplement:

- a. Title XIX Set Aside
- b. Community Outreach, Intervention, and Referral services.  
Restriction: Although Alcohol/Drug Information School is a component of Community Outreach, Intervention, And Referral Services, CJTA funds cannot be used to purchase Alcohol/Drug Information School services.
- c. Interim Services
- d. Crisis Services
- e. Detoxification Services
- f. Outpatient Treatment, General
- g. Opiate Substitution Treatment
- h. Case Management, General
- i. Intensive Inpatient
- j. Long Term Care
- k. Recovery House
- l. Involuntary Residential Treatment Services
- m. Screening Tests (UA screen/breathalyzer testing). Limited to no more than eight tests per month for each client.

2. The County shall use no more than ten percent of the total CJTA funds for the following services as described in the BARS manual and the DASA BARS supplement:

- a. Transportation
- b. Child Care Services

### **H. LOCAL MATCH REQUIREMENT**

The County is required to provide local match for services purchased with CJTA funds under the following conditions:

1. A dollar-for-dollar match for services to clients who are receiving services under the supervision of a drug court.
2. A 10 percent local match for services to clients who are not under the supervision of a drug court but against whom a prosecuting attorney in Washington State has filed charges.

The County shall document this match and report on the match on a Calendar Quarterly basis.

**I. MEDICAID ELIGIBILITY**

The County shall ensure that all clients are screened for Title XIX financial eligibility and referred to the local DSHS Community Services Office (CSO) for Title XIX eligibility determination if the financial screen so warrants.

**J. ELIGIBLE PROVIDERS**

All treatment services provided by these funds must be by DASA certified treatment providers.

**K. SERVICE RATES**

The rates paid shall not exceed the prevailing county rates for outpatient services or state rates for residential services.

**L. REPORTING REQUIREMENTS**

The County shall document services as follows:

- 1 All clients must be reported on TARGET.
- 2 Six-Month reporting: Submit the following reports to the Regional Administrator no later than sixty (60) days following the last day of the biennial quarter:
  - a. The Six-Month Activity Report, titled the Division of Alcohol and Substance Abuse – Drug Court Supplemental Services Reports.
  - b. The Six-Month Activity Report, titled the Division of Alcohol and Substance Abuse – Court Supervised (Non-Drug Court) Supplemental Services Reports.
3. Annual Report. Submit an annual progress report to the Regional Administrator that summarizes the status of the county's innovated project. The following items are to be included in the annual report:
  - a. Type of project (innovation, best practice, or regional



- project).
- b. Status or project (innovation, best practice, or regional project);
  - i. How has implementing the project enhanced treatment services?
  - ii. Capacity – number of people to be service in the report period.
- c. Progress in meeting projects goals and objectives.
- d. Evaluation strategy that addresses at a minimum:
  - i. Treatment retention/completion.
  - ii. Reduced involvement in criminal activity.

## **IX. STATE DRUG COURT**

In accordance with the County's Criminal Justice Plan and in consideration of any State Drug Court funds awarded in this Program Agreement, and any County controlled participation and other participation included in the Program Agreement, the County shall provide alcohol and drug treatment and treatment support services to adult or juvenile offenders within a drug court program as defined in RCW 70.96A.055 and RCW 2.28.170.

### **A. LIMITATIONS:**

The County may provide any of the following services as described in the DASA BARS supplement:

1. Title XIX Set Aside
2. Community Outreach, Intervention, And Referral Services. Restriction: Although Alcohol/Drug Information School is a component of Community Outreach, Intervention, And Referral Services, State Drug Court funds cannot be used to purchase Alcohol/Drug Information School services.
3. Interim Services
4. Crisis Services
5. Detoxification Services
6. Outpatient Treatment, General
7. Opiate Substitution Treatment
8. Transportation
9. Case Management, General
10. Child Care Services
11. Intensive Inpatient
12. Long Term Care
13. Recovery House
14. Involuntary Residential Treatment Services
15. Screening Tests (UA screen/breathalyzer testing). Limited to no more than eight tests per month for each client.

### **B. LOCAL MATCH REQUIREMENT**

The County is required to provide dollar-for-dollar match for services to clients who are receiving services under the supervision of a drug court.

The County shall document this match and report on the match on a Calendar Quarterly basis.

### **C. MEDICAID ELIGIBILITY**

The County shall ensure that all clients are screened for Title XIX financial eligibility and referred to the local DSHS Community Services Office (CSO) for Title XIX eligibility determination if the financial screen so

warrants.

**D. ELIGIBLE PROVIDERS**

All treatment services provided by these funds must be by DASA certified treatment providers.

**E. SERVICE RATES**

The rates paid shall not exceed the prevailing county rates for outpatient services or state rates for residential services.

**F. REPORTING REQUIREMENTS**

The County shall document services as follows:

1. All clients must be reported on TARGET.
2. Six-month reporting: Submit the following report to the Regional Administrator no later than sixty (60) days following the last day of the calendar quarter:
  - The Six-month Activity Report, titled the Division of Alcohol and Substance Abuse – Drug Court Supplemental Services Reports.

## **X. BYRNE - DRUG COURT**

In accordance with the County's Criminal Justice Plan, the County's Byrne grant proposal, and in consideration of any Byrne - Drug Court funds awarded in this Program Agreement, and any County controlled participation and other participation included in the Program Agreement, the County shall provide alcohol and drug treatment and treatment support services to nonviolent offenders within a drug court program as defined in RCW 70.96A.055 and RCW 2.28.170.

### **A. LIMITATIONS:**

The County may provide any of the following services as described in the DASA BARS supplement:

1. Crisis Services
2. Detoxification Services
3. Outpatient Treatment, General
4. Opiate Substitution Treatment
5. Transportation
6. Case Management, General
7. Child Care Services
8. Intensive Inpatient
9. Long Term Care
10. Recovery House
11. Involuntary Residential Treatment Services
12. Screening Tests (UA screen/breathalyzer testing). Limited to no more than eight tests per month for each client.

### **B. LOCAL MATCH REQUIREMENT**

The County is required to provide a 25 percent match for services to clients who are receiving services under the supervision of a drug court. The source of the match can be either local or state revenues. Match cannot be from a federal revenue source. The match must be cash.

The County shall document this match and report ~~on~~ the match on a Calendar Quarterly basis.

### **C. MEDICAID ELIGIBILITY**

Clients who are funded for services with Byrne Grant funds are not eligible for Title XIX reimbursement.

### **D. ELIGIBLE PROVIDERS**

All treatment services provided with these funds must be by DASA certified treatment providers

**E. SERVICE RATES**

The rates paid shall not exceed the prevailing county rates for outpatient services or state rates for residential services.

**F. REPORTING REQUIREMENTS**

The County shall document services as follows:

1. All clients must be reported on TARGET.
2. Calendar reporting: Submit the following reports to the Regional Administrator no later than twenty-five (25) days following the last day of the calendar quarter:
  - The Calendar Quarterly Activity Report, titled the Division of Alcohol and Substance Abuse – Drug Court Supplemental Services Reports.

## **XI. CHILDREN'S TRANSITION INITIATIVE**

In consideration of funds awarded for the Children's Transition Initiative (CTI), counties participating in the CTI must provide intensive prevention services to multiple youth, ages 9-13, for a minimum of ten consecutive months as described in Chapter 5 of the DASA County Implementation Guide (DCIG). Participating counties will negotiate the exact nature of those services with their Regional Prevention Manager and the CTI Lead, and detail their plan in the Performance Based Prevention System (PBPS). The County shall collect data as negotiated with DASA and report in the PBPS with the same frequency as required for other prevention services. The County shall also participate in statewide planning efforts.

Direct cash incentives are not allowed according to federal guidelines and are not billable. CTI participants can only receive incentives via stipends and these stipends cannot be open-ended. Stipends must target food or other items.

## **XII. COMMUNITY PREVENTION TRAINING SYSTEM**

In consideration of funds awarded in this Program Agreement for the Community Prevention Training System (CPTS);

- A. The County shall use its CPTS training allocation solely for training opportunities that will increase county capacity to implement science-based substance abuse prevention programming as negotiated with their Regional Administrator. It is expected that training dollars will be used to support the county's stated goals and objectives as identified in their needs assessment process.
- B. Due to budget limitations, the County is encouraged to collaborate with other counties whenever possible in the planning of local or regional training events.
- C. The County shall receive a biennial prevention training allocation based on its current "Counties Like Us" classifications in the Risk and Prevention Profile for Substance Abuse Prevention.
- D. If a County determines that it will not be able to fully expend its County Prevention Training allocations, the county is required to notify their Regional Administrator immediately so those funds may be re-allocated.
- E. The County shall report training events in the DASA Performance Based Prevention System.

### **XIII. TREATMENT EXPANSION SERVICES**

In accordance with the estimated number of treatment expansion clients identified in the county's Biennial Plan, and in consideration of any Treatment Expansion funds awarded in this Program Agreement and any County participation included in the Program Agreement, the County shall provide alcohol and drug treatment services per RCW 70.96A to the following individuals:

- Adults prioritized in the following order:
  1. Blind/Disabled/GA-X Client - 18 or Older at Admission and GA-X or SSI-eligible or SSI-Related Medical Assistance Only (But Not a Pregnant Female).
  2. Aged Client - 65 or Older at Admission and SSI-eligible or SSI-Related Medical Assistance Only (But Not a Pregnant Female).
  3. GA-U Client - 18 or Older at Admission and GA-U .
  4. Other Medicaid Client - 18 or Older at Admission and Medical Assistance Only or TANF.
- Youth prioritized as:
  1. Medicaid Client - Under 18 at Admission and GA-X or Medical Assistance Only or SSI-eligible or SSI Related Medical Assistance Only or TANF or GA-U.
  2. Non-Medicaid Client - Under 18 at Admission.

#### **A. LIMITATIONS:**

The County may provide any of the following services as described in the DASA BARS supplement:

1. Title XIX Set Aside
2. Community Outreach, Intervention, And Referral Services.  
Restriction: Although Alcohol/Drug Information School is a component of Community Outreach, Intervention, And Referral Services, Treatment Expansion funds cannot be used to purchase Alcohol/Drug Information School services.
3. Outpatient Treatment, General (for adult clients only)
4. Outpatient Treatment, PPW (for youth clients only)
5. Outpatient Treatment, Youth
6. Opiate Substitution Treatment
7. Intensive Inpatient (both adults and youth)
8. Long Term Care (both adults and youth)
9. Recovery House (both adults and youth)
10. Involuntary Residential Treatment Services
11. PPW Residential Treatment
12. Group Care Enhancement
13. Other Services as approved by the Regional Administrator



14. Screening Tests (UA screen/breathalyzer testing). Limited to no more than eight tests per month for each client.

**B. LOCAL MATCH REQUIREMENT**

The County is required to provide local 10 percent match for services purchased with Treatment Expansion funds.

**C. MEDICAID ELIGIBILITY**

The County shall ensure that all clients are screened for Title XIX financial eligibility and referred to the local DSHS Community Services Office (CSO) for Title XIX eligibility determination if the financial screen so warrants.

**D. ELIGIBLE PROVIDERS**

All treatment services provided by these funds must be by DASA-certified treatment providers.

**E. SERVICE RATES**

The rates paid shall not exceed the prevailing county rates for outpatient services or state rates for residential services.

**F. SERVICE ADJUSTMENTS**

The County shall provide treatment services for no less than 85 percent of one-fourth of the increased number of treatment expansion clients identified in the County's Biennial Plan during any State biennial quarter of the term of this Agreement. If the increased number of treatment expansion clients falls below the 85 percent level, DASA reserves the right to unilaterally reduce the Treatment Expansion funds awarded in this Agreement.

This language is added to ensure the Treatment Expansion funding is utilized to expand treatment capacity to the identified population as required by the legislative appropriation of these funds.

**G. REPORTING REQUIREMENTS**

The County shall ensure all services are documented in TARGET.